

## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-4073  
 www.iowa.gov/ethics

Reset Form

## FORM-GB

Gift or Bequest information received  
 by a department or accepted by the  
 Governor on behalf of the state

## For office use only

Indexed \_\_\_\_\_  
 Audited \_\_\_\_\_  
 Checked \_\_\_\_\_  
 Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

## DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Communications Network  
 Name of Department or Office  
 Grimes State Office Building, 400 E 14<sup>th</sup> Street, Des Moines, IA 50319  
 Mailing Address  
 515-725-4692  
 City, State, Zip Code  
 Area Code & Telephone No.

## CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Kevin Heinzeroth, Finance Director  
 Name  
 Mailing Address (if different from above)  
 Kevin.heinzeroth@iowa.gov  
 City, State, Zip (if different from above)  
 515-725-4732  
 Email Address  
 Area Code & Telephone Number (if different from above)

## DONOR OF GIFT OR BEQUEST:

Steve PALM  
 Name  
 4023 Cottage Grove Des Moines 50311  
 Mailing Address  
 City, State, Zip Code  
 515-255-1512  
 Area Code & Telephone Number  
 Email Address (optional)

12/14/2008  
 Date of Gift or Bequest  
 \$ 100.00  
 Amount/Value\*

\*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Wooden ICN logo

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

## Statement of Affirmation:

I, Kevin Heinzeroth affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

1-13-2009

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Area Code & Telephone No.

## CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Kevin Heinzeroth, Finance Director  
Name  
Mailing Address (if different from above) City, State, Zip (if different from above)  
Kevin.heinzeroth@iowa.gov 515-725-4732  
Email Address Area Code & Telephone Number (if different from above)

## DONOR OF GIFT OR BEQUEST:

John Gillispie  
Name ICN, Grimes State Office Building  
400 E. 14<sup>th</sup> St., Des Moines, IA 50319  
Mailing Address City, State, Zip Code  
515-725-4707  
Area Code & Telephone Number  
Email Address (optional)

12/22/08 \$ 95  
Date of Gift or Bequest Amount/Value\*

\*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Professionally mounted and framed newspaper article regarding  
soldier's use of ICN video to connect with his family

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## Statement of Affirmation:

I, Kevin Heinzeroth, affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Kevin Heinzeroth  
Signature

1-13-09  
Date